| INDIVIDUAL M | IEMBER PU | BLIC AF | FFAIRS TYI | PE ACT | ΓΙVΙΤΥ | REP | ORT | |
|---|------------|----------------|------------------------------|-----------------|---------------------------------|------|--------------|--|
| Member's Unit | | | | Charter RMR-CO- | # Grou | p Da | ate Prepared | |
| 1. Enter the name of the organization that you made a CAP presentation to: | | | | | | | | |
| 2. Enter the address of the organization: | | | | | | | | |
| a. Enter city, state and Zip of organization: | | | | | | | | |
| b. Enter name of point of contact or president of organization: | | | | | | | | |
| c. Describe the type of group presentation was made to: (Social, Political, Youth, etc.) | | | | | | | | |
| 3. Describe type of presentation made: (National's slide presentation, your own slides, speech, etc. See NOTE | | | | | | | | |
| 4. Enter the number of people present at presentation: | | | | | | | | |
| 5. Did you receive an acknowledgment or "Thank You" Letter? Yes N | | | | | 6. Is letter attached? Yes No | | | |
| 7. Was there media coverage of the event? | | | | | | | | |
| Enter Your Full Name (Please print or type) | | | | Rank: | Rank: | | CAPSN: | |
| Home Address: | | City: | City: State: Zi _l | | Zip · | + 4 | | |
| Home Telephone Number | Number | E-Mail Address | | | | | | |
| INSTRUCTIONS: | | | | | | | | |
| Prepare this report in triplicate. | | | | | | | | |
| Submit the ORIGINAL and first copy to YOUR UNIT Public Affairs Officer who will in turn submit it to the COWG/PA THRU your Group Hq and retain the third copy. Reports MUST be submitted to Group Hq in time to allow the Group PAO to compile unit reports for the COWGF 190a's in time to submit to COWG/PA | | | | | | | | |
| 3. This form documents the requirement to prepare and present a CAP presentation to a Non-CAP Group as outlined in CAPM 50-17, Attachment 3, Level IV Command and Staff completion requirements. This form, along with any acknowledgment letters should be filed in the member's personal file at home with a copy filed in the member's personnel file at the unit. | | | | | | | | |
| NOTE: A community relations event (Item 5) can be any of the following: a. A speech or slide briefing about Civil Air Patrol given to non-CAP audience. b. Participating in a radio program or appearing on television. c. Setting up and or manning a display at fairs, shopping malls, etc. d. Participating in a coffee break traffic safety program. e. Participating in a fund drive for some charitable cause other than CAP. f. Participating as ushers at a local event. g. Providing a color guard for a local event. h. Participating in a ramp check at airport fly-ins. i. Similar activities may be credited. | | | | | | | | |
| Print Name of individual subm | Signature: | | | | | | | |

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